and one cannot say how many patients are walking about suffering from the disease in a mild form in whom some of the major catastrophes never occur.

- 3. Its relationship to cancer is doubtful. Most writers say it is not a precursor, but W. T. Mayo found carcinoma in thirteen out of forty-two cases of diverticulitis.
- 4. It is hard to treat successfully. The treatment that is theoretically correct is often unsuitable and impracticable when one examines the type of patient—elderly, fat, and with a chronic history. A difficult operation requiring careful dissection may be expected, and this the average case will not stand. So that safe palliative operations are more than often performed.

(RADIOGRAM No. 1.—Opaque enema showing diverticulæ filled.)
(RADIOGRAM No. 2.—Pelvic colon now empty, but diverticulæ still filled.)

FORTHCOMING PAPERS

It is hoped to publish in the July number of the Journal a full report of the special meeting of the Ulster Medical Society at which a discussion on "Tonsil Infections in Relation to General Diseases" took place. The openers were Professor W. W. D. Thomson, Sir Thomas Houston, Mr. Anderson, and Mr. Gibson.

Other papers to be published in this number will include the following:--

"The Clinical Interpretation of Serological Reactions," by Dr. T. B. H. Haslett.

"The First Year's Working of 'Panel' Practice in Northern Ireland," by Dr. James Boyd.

REVIEW

ANTE-NATAL CARE. By W. E. T. Haultain and E. Chalmers Fahmy. Edinburgh: E. & S. Livingstone. Second edition, 1931. pp. XI+121; 1 plate. 5s. net. For several reasons this book on ante-natal care should make a wide appeal to the general practitioner. He is the one who can make ante-natal work successful in practice, and thus contribute greatly to the reduction of maternal mortality which is so earnestly desired. The authors have covered the ground fully and yet in a very concise manner. Where a number of methods of treatment are available, they have chosen to describe in detail the procedures they have found of most service in the Edinburgh hospitals to which they are attached, and to mention the alternatives in considerably less detail.

In the opening chapters the diagnosis and hygiene of pregnancy, together with methods of examination of the patient and the general outline of ante-natal care in pregnancy, are considered. Then follow chapters on the diagnosis and treatment of contracted pelvis, and the toxamias and hæmorrhages of pregnancy. In the section on albuminuria, it is stated that the normal blood area is 5 to 15 mg. per 100 c.c. of blood. In this school the normal range is considered to lie between 20 and 40 mg. per cent., and therefore the values given in this book seem to us rather low.